



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 5, 2025

Gavin Aikens
Neulife Rehabilitation of Michigan, Inc.
Suite 102
36975 Utica Road
Clinton Township, MI 48036

RE: License #: AS630411269
Investigation #: 2025A0465020
Progressions 1401 E. Buell

Dear Mr. Aikens:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Gonzalez".

Stephanie Gonzalez, LCSW
Adult Foster Care Licensing Consultant
Bureau of Community and Health Systems
Department of Licensing and Regulatory Affairs
Cadillac Place, Ste 9-100
Detroit, MI 48202
Cell: 248-308-6012
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enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AS630411269
Investigation #:	2025A0465020
Complaint Receipt Date:	04/03/2025
Investigation Initiation Date:	05/01/2025
Report Due Date:	06/02/2025
Licensee Name:	Neulife Rehabilitation of Michigan, Inc.
Licensee Address:	Suite 102 36975 Utica Road Clinton Township, MI 48036
Licensee Telephone #:	(586) 817-2593
Administrator:	Gavin Aikens
Licensee Designee:	Gavin Aikens
Name of Facility:	Progressions 1401 E. Buell
Facility Address:	1401 E. Buell Road Rochester, MI 48363
Facility Telephone #:	(248) 651-5365
Original Issuance Date:	07/14/2022
License Status:	REGULAR
Effective Date:	01/14/2025
Expiration Date:	01/13/2027
Capacity:	5
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Direct care staff have not received traumatic brain injury training.	Yes
Direct care staff are rude to residents.	No
Direct care staff shared Resident D's confidential information with other residents in the home.	No

III. METHODOLOGY

04/03/2025	Special Investigation Intake 2025A0465020
04/30/2025	Intake assigned to Stephanie Gonzalez for investigation
04/30/2025	Contact – Document sent Email exchange with Complainant
05/01/2025	Special Investigation Initiated - On Site Inspection completed onsite; Completed walk-through, interviewed Resident A, Resident B, and staff member, Katie Jagenow and Bushar Matammara
05/07/2025	Contact - Document Received Facility documents received via email
05/14/2025	Contact - Telephone call made I spoke to Guardian A1 via telephone
05/16/2025	Contact - Telephone call made I spoke to Guardian C1 via telephone
05/20/2025	Contact - Telephone call made I spoke to Relative D1 via telephone
05/20/2025	Contact - Telephone call made I spoke to direct care staff, Cathy Mayer, via telephone
05/23/2025	Exit Conference I conducted an Exit Conference with licensee designee/administrator, Gavin Aikens, via telephone

ALLEGATION:

Direct care staff have not received traumatic brain injury training.

INVESTIGATION:

On 4/30/2025, a complaint was received and assigned for investigation. The complaint stated that direct care staff have not received traumatic brain injury training. The complaint stated that the facility specializes in caring for individuals with traumatic brain injuries (TBI) and that there is concern that direct care staff are not trained to care for the residents in the facility.

On 5/1/2025, I completed an onsite investigation at the facility. The home was issued an adult foster care license on 7/14/2022 and specializes in caring for individuals with medical diagnosis of traumatic brain injuries. At the time of my onsite investigation, there were four employees currently employed at the facility: Katie Jagenow, Cathy Mayer, Bashar Mutamarra and Kathy Glinecki. While onsite at the facility, I spoke to direct care staff, Katie Jagenow and Bashar Mutamarra.

I reviewed the NeuLife Rehabilitation of Michigan Traumatic Brain Injury Training Curriculum. I was unable to locate documentation to confirm that Ms. Jagenow, Ms. Mayer, Mr. Mutamarra and Ms. Glinecki completed TBI training.

I spoke to direct care staff, Katie Jagenow, who stated that she has worked at the facility for several years. Ms. Jagenow stated, "I have been trained to care for TBI residents, and I have completed multiple trainings over the last several years. I do not have copies of my trainings, but the corporation should have them. I am trained and able to do this job." Ms. Jagenow acknowledged she does not have copies of her training certificates but stated that she did complete all required TBI trainings and is unsure of what is in her employee file.

I spoke to direct care staff, Bashar Mutamarra. Mr. Mutamarra stated that he has completed TBI training and refresher trainings during the time he has been employed at the adult foster care facility. Mr. Mutamarra stated that he is competent and able to provide care to the TBI population. Mr. Mutamarra stated that he does not have copies of his TBI training certificates.

On 5/20/2025, I spoke to direct care staff, Cathy Mayer, via telephone. Ms. Mayer stated that she completed TBI training as well as multiple refresher training courses specific to the TBI population. Ms. Mayer stated, "I have completed several TBI trainings over the years and I have been trained in how to care for the TBI population. I provide good care to the residents and have not had any issues or concerns at work." Ms. Mayer acknowledged that she does not have copies of her training certificates.

On 5/7/2025 and 5/23/2025, I spoke licensee designee/administrator, Gavin Aikens, via email exchange. Mr. Aikens stated that Ms. Mayer, Mr. Mutamarra and Ms. Glinecki have not yet attended the NeuLife TBI training. Mr. Aikens stated that he did not realize the staff have not yet completed this training through the NeuLife but stated that the staff did complete TBI training through the prior corporation before the change of ownership took place in 2022. Mr. Aikens stated that the staff completed TBI training through the prior corporation, but he does not have access to the old files. Mr. Aikens stated that he will ensure all staff complete the refresher TBI training as soon as possible.

APPLICABLE RULE	
R 400.14208	Direct care staff and employee records.
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: (e) Verification of experience, education, and training
ANALYSIS:	<p>According to the NeuLife TBI Training Curriculum and Mr. Aikens, Ms. Jagenow, Ms. Mayer, Mr. Mutamarra and Ms. Glinecki, they have completed the required TBI training, however the facility did not maintain a copy of their TBI training record in the employee files.</p> <p>Based on the information above, there is sufficient information to confirm that the facility did not properly obtain and maintain verification of TBI training for direct care staff when the change of ownership occurred in 2022.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Direct care staff are rude to residents.

INVESTIGATION:

On 4/30/2025, a complaint was assigned for investigation. The complaint stated that direct care staff are rude to residents. The complaint did not provide any additional information.

During my onsite investigation on 5/1/2025, I completed a walk-through of the facility, interviewed Resident A, Resident B, and staff member, Katie Jagenow and Bushar Matammara. I observed the facility to be well maintained and all residents to be properly dressed and with adequate hygiene.

I spoke to Resident A, who stated that she likes living at the facility and has no current concerns. Resident A stated, "I like it here. Staff are nice and help me. No one has been mean to me or done anything bad to me." Resident A did not vocalize any concerns related to this complaint.

I spoke to Resident B, who stated that he is doing well at the facility. Resident B stated, "Things here are good. Staff are okay. Everything is okay." Resident B denied knowledge of this complaint being true.

I spoke to Ms. Jagenow, who stated, "I have not been rude or disrespectful to residents and I have not observed any staff mistreat residents." Ms. Jagenow denied knowledge of this complaint being true.

I spoke to Mr. Mutamarra, who stated, "I am not aware of anyone being rude or disrespectful to residents." Mr. Mutamarra stated that he has never been rude or disrespectful to residents and has not observed any staff be rude to residents. Mr. Mutamarra denied knowledge of this complaint being true.

On 5/14/2025, I spoke to Guardian A1 via telephone. Guardian A1 stated, "I have no concerns related to the staff interactions with Resident A. I have observed the staff to be great at addressing issues right away and remaining professional when concerns arise. I am not aware of any issues." Guardian A1 denied knowledge of this complaint being true.

On 5/16/2025, I spoke to Guardian C1 via telephone. Guardian C1 stated, "I have no concerns at all. The facility and staff have done a great job, and I have not had an issue." Guardian C1 denied knowledge of this complaint being true.

On 5/20/2025, I spoke to Ms. Mayer, who stated, "I have never yelled at or been rude to any resident. There have been some residents in the past that can become verbally or physically aggressive, but not staff. I have not observed any staff be rude or disrespectful to residents." Ms. Mayer denied knowledge of this complaint being true.

On 5/7/2025 and 5/23/2025, I spoke Mr. Aikens via email. Mr. Aikens stated that he is not aware of any concerns with staff being disrespectful or rude towards residents. Mr. Aikens denied knowledge of this complaint being true.

APPLICABLE RULE	
R 400.14304	Resident rights; licensee responsibilities.
	(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or

	<p>the resident's designated representative, a copy of all of the following resident rights:</p> <p>(o) The right to be treated with consideration and respect, with due recognition of personal dignity, individuality, and the need for privacy.</p>
ANALYSIS:	<p>According to Resident A and Resident B, they have not been treated in a disrespectful manner and have not observed any other resident be treated disrespectfully by staff.</p> <p>According to Mr. Aikens, Ms. Jagenow, Ms. Mayer, and Mr. Mutamarra, they have not treated any resident in a disrespectful or rude manner. Mr. Aikens, Ms. Jagenow, Ms. Mayer and Mr. Mutamarra denied knowledge of this complaint being true.</p> <p>Based on the information above, there is not sufficient information to confirm that direct care staff are being rude to residents.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Direct care staff shared Resident D's confidential information with other residents in the home.

INVESTIGATION:

On 4/30/2025, a complaint was assigned for investigation. The complaint stated that direct care staff shared Resident D's confidential information with other residents in the home. The complaint did not provide any additional information.

I reviewed Resident D's record, which stated that he was admitted to the facility on 12/9/2024, discharged on 2/12/2025 and does not have a legal guardian. The *Health Care Appraisal* listed Resident D's medical diagnosis as Unspecified Intracranial Injury, Cognitive Deficits, Paranoid Personality Disorder and Manic Episodes. The *Assessment Plan for AFC Residents* stated that Resident D was able to move freely in the community, had a history of anxious and defiant behavior, has a history of verbal aggression, independently completes self-care tasks and does not require use of assistive devices. At the time of my onsite investigation on 5/1/2025, Resident D was no longer residing at the facility due to being incarcerated for a criminal conviction, therefore, I was unable to interview Resident D as part of this investigation.

I spoke to Resident A, who stated that she likes living at the facility and has no current concerns. Resident A stated, "I have not heard any staff talk about other

residents or tell me personal information. Everything has been good.” Resident A did not vocalize any concerns related to this complaint.

I spoke to Resident B, who stated that he is doing well at the facility. Resident B stated, “The staff are nice. I don’t know any person information about anyone else that lives here. Staff don’t tell us those things.” Resident B denied knowledge of this complaint being true.

I spoke to Ms. Jagenow, who stated, “I have not shared any personal or confidential information about a resident with other residents. I do not know anything about this happening. When Resident D lived here, he often would talk to others about his personal life and situation. He would tell other residents’ information but that was his choice. I never have shared personal or confidential information with residents.” Ms. Jagenow denied knowledge of this complaint being true.

I spoke to Mr. Mutamarra, who stated, “I have not told any resident personal or confidential information about other residents. I am not aware of any other staff doing this either. I never told a resident personal information about Resident D.” Mr. Mutamarra denied knowledge of this complaint being true.

On 5/14/2025, I spoke to Guardian A1 via telephone. Guardian A1 stated, “I have no concerns related to the staff interactions with Resident A nor concerns with maintaining confidentiality. I have observed the staff to be great at addressing issues right away and remaining professional when concerns arise. I am not aware of any issues.” Guardian A1 denied knowledge of this complaint being true.

On 5/16/2025, I spoke to Guardian C1 via telephone. Guardian C1 stated, “I have no concerns at all. The facility and staff have done a great job, and I have not had any issues related to maintaining confidentiality or professionalism.” Guardian C1 denied knowledge of this complaint being true.

On 5/20/2025, I spoke to Ms. Mayer, who stated, “I have never shared confidential information with any resident about another resident. Resident D has a history of walking around and telling the other residents his personal information and issues and then would blame staff for it. He had a lot of issues with memory, and this caused him to become frustrated about things that did not happen.” Ms. Mayer denied knowledge of this complaint being true.

On 5/20/2025, I spoke to Relative D1 via telephone. Relative D1 stated, “I have not spoken to Resident D in several months. I am unsure where he is living now or if he is incarcerated. Resident D has a lot of mental health issues, and he often will become confused and paranoid about things that are not true. I do not believe that the facility did anything wrong.” Relative A1 did not vocalize any concerns related to this concern.

On 5/7/2025 and 5/23/2025, I spoke Mr. Aikens via email. Mr. Aikens stated that he is not aware of any incidents involving staff sharing personal and confidential information about Resident D, nor any other resident, with other residents. Mr. Aikens denied knowledge of this complaint being true.

On 5/23/2025, I conducted an Exit Conference with licensee designee/administrator, Gavin Aikens, via telephone. Mr. Aikens is in agreement with the findings of this report.

APPLICABLE RULE	
R 400.14304	Resident rights; licensee responsibilities.
	<p>(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights:</p> <p>(q) The right to confidentiality of records as stated in section 12(3) of the act.</p>
ANALYSIS:	<p>According to Resident A and Resident B, they have not observed any direct care staff share confidential information with other residents.</p> <p>According to Mr. Aikens, Ms. Jagenow, Ms. Mayer, and Mr. Mutamarra, they have not shared personal and confidential information about Resident D, nor any other resident, with other residents. Mr. Aikens, Ms. Jagenow, Ms. Mayer and Mr. Mutamarra denied knowledge of this complaint being true.</p> <p>Based on the information above, there is not sufficient information to confirm that direct care staff have failed to ensure the right to privacy of Resident D and the other residents currently residing at the facility.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend that this special investigation be closed with no change to the status of the license.

Stephanie Gonzalez

5/28/2025

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:

Jay Caluverts

For

06/05/2025

Denise Y. Nunn
Area Manager

Date